

KENTUCKY REGISTRY OF ELECTION FINANCE
140 Walnut Street
Frankfort, Kentucky 40601-3240
(502) 573-2226 FAX (502) 573-5622
www.kref.ky.gov

PERMANENT COMMITTEE (PAC)
ELECTION FINANCE STATEMENT
COVER PAGE

1. PAC Name and Mailing Address:

PAC Acronym (if applicable):

2. KREF Filer Number:

This Space for Registry Use Only

Logged _____ Keyed _____

3. Chairperson's Name and Mailing Address:

Daytime Phone #: (____) ____ - _____

4. Treasurer's Name and Mailing Address:

Daytime Phone #: (____) ____ - _____

5. Custodian's Name and Mailing Address:

Daytime Phone #: (____) ____ - _____

6. Type of Statement:

a. ☐ Quarterly

b. ☐ Termination for _____
Month - Day - Year

c. ☐ AMENDMENT for _____
(Indicate which report is being amended)

7. This Statement Covers:

From: _____
Month - Day - Year

To: _____
Month - Day - Year

**NOTE: USE ONLY THOSE PAGES WHICH
APPLY TO YOUR PAC. YOU MAY DUPLICATE
SCHEDULES AS NEEDED.**

8. Verification: I certify that I have examined this Election Finance Statement and to the best of my knowledge and belief it is true, correct, and complete.

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this statement to the penalties of KRS 121.990.

Chairperson or
Treasurer: _____

Type or Print Name

Authorized Signature

Date: _____

Month-Day-Year

SUMMARY PAGE

Committee: _____ **KREF Filer #** _____ **Period From:** _____ **To:** _____

RECEIPTS

**COLUMN I
(THIS PERIOD)**

**COLUMN II
(CUMULATIVE THIS YEAR)**

1. CONTRIBUTIONS: (including all receipts from Events)

a. Itemized by check or written instrument (Schedule 1, Item 7a)

\$ _____

b. Other receipts (Schedule 1, Item 7b)

+\$ _____

c. Receipts in currency (Number of People _____)
(Individual cash contribution limit is \$50) (Schedule 1A)

+\$ _____

d. Anonymous (Number of People _____)
(Maximum \$50 per contribution)

+\$ _____

\$ _____
(\$1,000 Maximum per election)

e. Unitemized contributions (Number of People _____)
(Contributions by check of \$100 or less)

+\$ _____

2. TOTAL RECEIPTS

=\$ _____

\$ _____

DISBURSEMENTS

3. TOTAL DISBURSEMENTS (Schedule 2, Item 7)

\$ _____

\$ _____

IN-KIND CONTRIBUTIONS

4. a. In-kind Contributions Received (Schedule 1B, Item 7)

\$ _____

\$ _____

b. In-kind Contributions Given (Schedule 2A, Item 7)

\$ _____

\$ _____

DEBTS AND OBLIGATIONS INFORMATION

5. Total Debts and Obligations (Schedule 4, Item 10)

\$ _____

BALANCE STATEMENT

6. Ending balance of last report (Enter -0- if no previous report)

\$ _____

7. Add total amount received during reporting period (Line 2, Column 1)

+\$ _____

8. Sub-Total (Add lines 6 and 7)

=\$ _____

9. Subtract total amount disbursed during reporting period (Line 3, Column 1)

-\$ _____

10. ENDING BALANCE (Subtract Line 9 from Line 8)

=\$ _____

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601-3240 (502) 573-2226 FAX (502) 573-5622 www.kref.ky.gov		1. PAC Name:			3. This Statement Covers: From: _____ Month - Day - Year To: _____ Month - Day - Year	
		2. KREF Filer Number:				
4. Name and Address from whom received. Receipts in excess of \$100 <i>must</i> be itemized. All contributions from other PACs, regardless of amount, <i>must</i> be itemized	5. Type of Contribution or Other Receipt	6. Date of Receipt	AMOUNT		8. Cumulative for Year (per contributor) (Monetary and In-kind)	9. Occupation and Employer of Contributor. (If self-employed, name under which doing business.) Occupation shall be specific. <i>OR</i> Major Business, Social or Political Interest represented by the PAC
	<input type="checkbox"/> Direct from a person or authorized entity. <input type="checkbox"/> From Fundraising Event <input type="checkbox"/> Transfer of funds from affiliated committee <input type="checkbox"/> Other: _____		7a. Contribution by check or written instrument	7b. Other Receipts		
	<input type="checkbox"/> Direct from a person or authorized entity. <input type="checkbox"/> From Fundraising Event <input type="checkbox"/> Transfer of funds from affiliated committee <input type="checkbox"/> Other: _____					
	<input type="checkbox"/> Direct from a person or authorized entity. <input type="checkbox"/> From Fundraising Event <input type="checkbox"/> Transfer of funds from affiliated committee <input type="checkbox"/> Other: _____					
	<input type="checkbox"/> Direct from a person or authorized entity. <input type="checkbox"/> From Fundraising Event <input type="checkbox"/> Transfer of funds from affiliated committee <input type="checkbox"/> Other: _____					
	<input type="checkbox"/> Direct from a person or authorized entity. <input type="checkbox"/> From Fundraising Event <input type="checkbox"/> Transfer of funds from affiliated committee <input type="checkbox"/> Other: _____					

Subtotal This Page		

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601-3240 (502) 573-2226 FAX (502) 573-5622 www.kref.ky.gov	1. PAC Name: _____ 2. KREF Filer Number: _____	3. This Statement Covers: From: _____ Month - Day - Year To: _____ Month - Day - Year
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Date of Contribution	Amount of Contribution
Subtotal - # of Contributors	Subtotal - Amount of Contributions

Date of Contribution	Amount of Contribution
Subtotal - # of Contributors	Subtotal - Amount of Contributions

Date of Contribution	Amount of Contribution
Subtotal - # of Contributors	Subtotal - Amount of Contributions

Date of Contribution	Amount of Contribution
Subtotal - # of Contributors	Subtotal - Amount of Contributions

Date of Contribution	Amount of Contribution
Subtotal - # of Contributors	Subtotal - Amount of Contributions

Subtotal This Page

Number of Contributors	Amount of Contributions
Total # of Contributors	Total Amount This Period

(Only on last page of Schedule) Total This Period

Enter these totals on line 1c on Summary Page

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601-3240 (502) 573-2226 FAX (502) 573-5622 www.kref.ky.gov		1. PAC Name: <hr/> 2. KREF Filer Number: <hr/>			3. This Statement Covers: From: _____ Month - Day - Year To: _____ Month - Day - Year	
4. Name and Address from whom received. Receipts in excess of \$100 <i>must</i> be itemized.	5. Describe In-Kind Contribution	6. Date of Receipt	7. Value of In-Kind Contribution	8. Cumulative for Year (per contributor) (Monetary AND In-Kind)	9. Occupation and Employer of Contributor. (If self-employed, name under which doing business.) Occupation shall be specific, OR Major Business, Social or Political Interest represented by the PAC	

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601-3240 (502) 573-2226 FAX (502) 573-5622 www.kref.ky.gov DISBURSEMENTS SCHEDULE 2	1. PAC Name:		3. This Statement Covers:	
	2. KREF Filer Number:		From: _____ Month - Day - Year To: _____ Month - Day - Year	
4. Name, Address and Occupation of person to whom paid. (If over \$25, disbursement <i>must</i> be made by check.)	5. List purpose for EACH disbursement. (Be specific) (If \$25 or less, show purpose, date and amount.) Recipient of expenditure, if other than PAC, must be listed.		6. Date	7. Amount Disbursed

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	2. KREF Filer Number:		
4. Name and Address of Candidate/Committee to Whom In-kind Contribution was Made.	5. Description of In-kind Contribution. (Be specific)	6. Date	7. Value of In-kind Contribution

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601-3240 (502) 573-2226 FAX (502) 573-5622 www.kref.ky.gov		1. PAC Name:		3. This Statement Covers: From: _____ Month - Day - Year To: _____ Month - Day - Year	
		2. KREF Filer Number:			
4. Date Activity or Event was Held	5. Name of Person Sponsoring Event and Address Where Activity was Held	6. Type of Fundraising Activity or Event. (Recipient, if other than PAC, must be listed.)		7. Total Amount Received	8. Total Cost

NOTE: Each fundraising activity or event must be listed separately. This schedule must be filed with the Election Finance Statement covering the period in which the fundraising activity or event took place, and is for informational purposes *only*. All receipts in excess of \$100 must be itemized on Schedule 1, and all other receipts must be included on Schedule 1A, Cash Receipts, or on the Summary Page as unitemized, anonymous, or in-kind receipts. All costs incurred in connection with activities or events must be included on Schedule 2, or as in-kind contributions on Schedule 1B.

KREF 006/P KENTUCKY REGISTRY OF ELECTION FINANCE 140 Walnut Street Frankfort, Kentucky 40601-3240 (502) 573-2226 FAX (502) 573-5622 www.kref.ky.gov <div style="text-align: center;"> DEBTS AND OBLIGATIONS SCHEDULE 4 <i>Duplicate Schedule As Needed</i> </div>		1. PAC Name:			3. This Statement Covers: From: _____ Month - Day - Year To: _____ Month - Day - Year	
		2. KREF Filer Number:				
4. Name and Mailing Address to Whom Debt is Owed	5. Type of Obligation	6. Date Incurred	7. Original Amount	8. Prior Payment	9. Payment Made this Reporting Period	10. Outstanding Balance at Close of This Period

Subtotal This Page

(Only on last page of Schedule)

Total This Period

NOTE: If you have debts or obligations, this schedule must be filed with every Finance Statement up to and including the period in which all debts are paid or otherwise satisfied.

Enter this total on line 5 "Total Debts & Obligations" on the Summary Page